

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing

PHA Plans

5 Year Plan for Fiscal Years 2001 - 2005

Annual Plan for Fiscal Year 2001

**NOTE: THIS PHA PLANS TEMPLATE (HUD 50075) IS TO BE COMPLETED IN
ACCORDANCE WITH INSTRUCTIONS LOCATED IN APPLICABLE PIH NOTICES**

PHA Plan Agency Identification

PHA Name: Morgan County Housing Authority

PHA Number: IL 79

PHA Fiscal Year Beginning: (July, 2001)

Public Access to Information

Information regarding any activities outlined in this plan can be obtained by contacting: (select all that apply)

- ☒ Main administrative office of the PHA
- ☐ PHA development management offices
- ☐ PHA local offices

Display Locations For PHA Plans and Supporting Documents

The PHA Plans (including attachments) are available for public inspection at: (select all that apply)

- ☒ Main administrative office of the PHA
- ☐ PHA development management offices
- ☐ PHA local offices
- ☐ Main administrative office of the local government
- ☐ Main administrative office of the County government
- ☐ Main administrative office of the State government
- ☐ Public library
- ☐ PHA website
- ☐ Other (list below)

PHA Plan Supporting Documents are available for inspection at: (select all that apply)

- ☒ Main business office of the PHA
- ☐ PHA development management offices
- ☐ Other (list below)

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5-YEAR PLAN
PHA FISCAL YEARS 2001 - 2005
[24 CFR Part 903.5]

A. Mission

State the PHA's mission for serving the needs of low-income, very low income, and extremely low-income families in the PHA's jurisdiction. (select one of the choices below)

- ☐ The mission of the PHA is the same as that of the Department of Housing and Urban Development: To promote adequate and affordable housing, economic opportunity and a suitable living environment free from discrimination.
- ☒ The Morgan County Housing Authority's mission is: To provide adequate and affordable housing, economic opportunity and a suitable living environment free from discrimination.

B. Goals

The goals and objectives listed below are derived from HUD's strategic Goals and Objectives and those emphasized in recent legislation. PHAs may select any of these goals and objectives as their own, or identify other goals and/or objectives. Whether selecting the HUD-suggested objectives or their own, **PHAS ARE STRONGLY ENCOURAGED TO IDENTIFY QUANTIFIABLE MEASURES OF SUCCESS IN REACHING THEIR OBJECTIVES OVER THE COURSE OF THE 5 YEARS.** (Quantifiable measures would include targets such as: numbers of families served or PHAS scores achieved.) PHAs should identify these measures in the spaces to the right of or below the stated objectives.

HUD Strategic Goal: Increase the availability of decent, safe, and affordable housing.

- ☒ PHA Goal: Expand the supply of assisted housing
Objectives:
- ☐ Apply for additional rental vouchers:
 - ☒ Reduce public housing vacancies: By 10%
 - ☐ Leverage private or other public funds to create additional housing opportunities:
 - ☐ Acquire or build units or developments
 - ☐ Other (list below)
- ☒ PHA Goal: Improve the quality of assisted housing
Objectives:
- ☒ Improve public housing management: (PHAS score) 88% or above

- ☐ Improve voucher management: (SEMAP score)
- ☒ Increase customer satisfaction:
- ☐ Concentrate on efforts to improve specific management functions: (list; e.g., public housing finance; voucher unit inspections)
- ☒ Renovate or modernize public housing units: Project wide
- ☐ Demolish or dispose of obsolete public housing:
- ☐ Provide replacement public housing:
- ☐ Provide replacement vouchers:
- ☐ Other: (list below)

☒ PHA Goal: Increase assisted housing choices

Objectives:

- ☐ Provide voucher mobility counseling:
- ☐ Conduct outreach efforts to potential voucher landlords
- ☐ Increase voucher payment standards
- ☐ Implement voucher homeownership program:
- ☐ Implement public housing or other homeownership programs:
- ☒ Implement public housing site-based waiting lists: For all developments
- ☐ Convert public housing to vouchers:
- ☐ Other: (list below)

HUD Strategic Goal: Improve community quality of life and economic vitality

☒ PHA Goal: Provide an improved living environment

Objectives:

- ☐ Implement measures to deconcentrate poverty by bringing higher income public housing households into lower income developments:
- ☐ Implement measures to promote income mixing in public housing by assuring access for lower income families into higher income developments:
- ☒ Implement public housing security improvements and reduce measurable crime by 20%
- ☐ Designate developments or buildings for particular resident groups (elderly, persons with disabilities)
- ☐ Other: (list below)

HUD Strategic Goal: Promote self-sufficiency and asset development of families and individuals

☒ PHA Goal: Promote self-sufficiency and asset development of assisted households

Objectives:

- ☐ Increase the number and percentage of employed persons in assisted families:
- ☒ Provide or attract supportive services to improve assistance recipients' employability:
- ☐ Provide or attract supportive services to increase independence for the elderly or families with disabilities.
- ☐ Other: (list below)

HUD Strategic Goal: Ensure Equal Opportunity in Housing for all Americans

- ☒ PHA Goal: Ensure equal opportunity and affirmatively further fair housing

Objectives:

- ☒ Undertake affirmative measures to ensure access to assisted housing regardless of race, color, religion national origin, sex, familial status, and disability:
- ☐ Undertake affirmative measures to provide a suitable living environment for families living in assisted housing, regardless of race, color, religion national origin, sex, familial status, and disability:
- ☐ Undertake affirmative measures to ensure accessible housing to persons with all varieties of disabilities regardless of unit size required:
- ☐ Other: (list below)

**Annual PHA Plan
PHA Fiscal Year 2001**

[24 CFR Part 903.7]

i. Annual Plan Type:

Select which type of Annual Plan the PHA will submit.

- ☒ **Standard Plan**

Streamlined Plan:

- ☐ **High Performing PHA**
- ☐ **Small Agency (<250 Public Housing Units)**
- ☐ **Administering Section 8 Only**

- ☐ **Troubled Agency Plan**

ii. Executive Summary of the Annual PHA Plan

- Create a “Campus of Learning” at Walnut Terrace by renovating empty obsolete apartments into classrooms for School District #117, Pre-Kg Early Years Program.
- Provide on the job training for public housing residents in our Basic Building Maintenance Program.
- Hire back additional Police “Call Back” Services - targeting gang, drug and violent criminal activity in Beat Three with Directed Preventative Patrols.
- Modernize Walnut Terrace Dwelling Units for low income families..
- Enhance resident and public parking at Walnut Terrace and the Turner High Rise.
- Convert 20-1 bedroom apartments into 10-2 bedroom units at the Beecher High Rise apartments.

In summary, we are on course to improve the condition of affordable housing in Morgan County.

iii. Annual Plan Table of Contents

[24 CFR Part 903.7 9 ®]

Provide a table of contents for the Annual Plan, including attachments, and a list of supporting documents available for public inspection.

Table of Contents

Annual Plan

- i. Executive Summary
- ii. Table of Contents
 1. Housing Needs
 2. Financial Resources
 3. Policies on Eligibility, Selection and Admissions
 4. Rent Determination Policies
 5. Operations and Management Policies
 6. Grievance Procedures
 7. Capital Improvement Needs
 8. Demolition and Disposition
 9. Designation of Housing

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10. Conversions of Public Housing
11. Homeownership
12. Community Service Programs
13. Crime and Safety
14. Pets Policy
15. Civil Rights Certifications (included with PHA Plan Certifications)
16. Audit
17. Asset Management
18. Other Information

Attachments

Indicate which attachments are provided by selecting all that apply. Provide the attachment's name (A, B, etc.) in the space to the left of the name of the attachment. Note: If the attachment is provided as a **SEPARATE** file submission from the PHA Plans file, provide the file name in parentheses in the space to the right of the title.

Required Attachments:

- | | |
|----------|---|
| il079a01 | (P&E Reports / FY 2001 Capital Fund Program and 5 Year Action Plan) |
| il079b01 | (Deconcentration) |
| il079c01 | (Statement of Progress) |
| il079d01 | (RAB Membership) |
| il079e01 | (Pet Policy) |
| il079f01 | (Resident Comments) |
| il079g01 | (Community Service Implementation) |

Optional Attachments:

- ☐ Other (List below, providing each attachment name)

Supporting Documents Available for Review

Indicate which documents are available for public review by placing a mark in the “Applicable & On Display” column in the appropriate rows. All listed documents must be on display if applicable to the program activities conducted by the PHA.

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Applicable Plan Component
√	PHA Plan Certifications of Compliance with the PHA Plans and Related Regulations	5 Year and Annual Plans
√	State/Local Government Certification of Consistency with the Consolidated Plan	5 Year and Annual Plans
√	Fair Housing Documentation: Records reflecting that the PHA has examined its programs or proposed programs, identified any impediments to fair housing choice in those programs, addressed or is addressing those impediments in a reasonable fashion in view of the resources available, and worked or is working with local jurisdictions to implement any of the jurisdictions’ initiatives to affirmatively further fair housing that require the PHA’s involvement.	5 Year and Annual Plans
√	Consolidated Plan for the jurisdiction/s in which the PHA is located (which includes the Analysis of Impediments to Fair Housing Choice (AI))) and any additional backup data to support statement of housing needs in the jurisdiction	Annual Plan: Housing Needs
√	Most recent board-approved operating budget for the public housing program	Annual Plan: Financial Resources;
√	Public Housing Admissions and (Continued) Occupancy Policy (A&O), which includes the Tenant Selection and Assignment Plan [TSAP]	Annual Plan: Eligibility, Selection, and Admissions Policies
	Section 8 Administrative Plan	Annual Plan: Eligibility,

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List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Applicable Plan Component
√		Selection, and Admissions Policies
√	Public Housing Deconcentration and Income Mixing Documentation: 1. PHA board certifications of compliance with deconcentration requirements (section 16(a) of the US Housing Act of 1937, as implemented in the 2/18/99 <i>Quality Housing and Work Responsibility Act Initial Guidance; Notice</i> and any further HUD guidance) and 2. Documentation of the required deconcentration and income mixing analysis	Annual Plan: Eligibility, Selection, and Admissions Policies
√	Public housing rent determination policies, including the methodology for setting public housing flat rents <input type="checkbox"/> check here if included in the public housing A & O Policy	Annual Plan: Rent Determination
√	Schedule of flat rents offered at each public housing development <input type="checkbox"/> check here if included in the public housing A & O Policy	Annual Plan: Rent Determination
√	Section 8 rent determination (payment standard) policies <input type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Rent Determination
√	Public housing management and maintenance policy documents, including policies for the prevention or eradication of pest infestation (including cockroach infestation)	Annual Plan: Operations and Maintenance
√	Public housing grievance procedures <input type="checkbox"/> check here if included in the public housing A & O Policy	Annual Plan: Grievance Procedures
√	Section 8 informal review and hearing procedures <input type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Grievance Procedures

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List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Applicable Plan Component
√	The HUD-approved Capital Fund/Comprehensive Grant Program Annual Statement (HUD 52837) for the active grant year	Annual Plan: Capital Needs
	Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grant	Annual Plan: Capital Needs
√	Most recent, approved 5 Year Action Plan for the Capital Fund/Comprehensive Grant Program, if not included as an attachment (provided at PHA option)	Annual Plan: Capital Needs
	Approved HOPE VI applications or, if more recent, approved or submitted HOPE VI Revitalization Plans or any other approved proposal for development of public housing	Annual Plan: Capital Needs
	Approved or submitted applications for demolition and/or disposition of public housing	Annual Plan: Demolition and Disposition
√	Approved or submitted applications for designation of public housing (Designated Housing Plans)	Annual Plan: Designation of Public Housing
√	Approved or submitted assessments of reasonable revitalization of public housing and approved or submitted conversion plans prepared pursuant to section 202 of the 1996 HUD Appropriations Act	Annual Plan: Conversion of Public Housing
	Approved or submitted public housing homeownership programs/plans	Annual Plan: Homeownership
	Policies governing any Section 8 Homeownership program <input type="checkbox"/> check here if included in the Section 8 Administrative Plan	Annual Plan: Homeownership
√	Any cooperative agreement between the PHA and the TANF agency	Annual Plan: Community Service & Self-Sufficiency
√	FSS Action Plan/s for public housing and/or Section 8	Annual Plan: Community Service & Self-Sufficiency
√	Most recent self-sufficiency (ED/SS, TOP or ROSS or other resident services grant) grant program reports	Annual Plan: Community Service & Self-Sufficiency
	The most recent Public Housing Drug Elimination Program (PHEDEP) semi-annual performance report for any open grant and most recently submitted PHDEP application	Annual Plan: Safety and Crime Prevention

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List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Applicable Plan Component
	(PHDEP Plan)	
√	The most recent fiscal year audit of the PHA conducted under section 5(h)(2) of the U.S. Housing Act of 1937 (42 U.S.C. 1437c(h)), the results of that audit and the PHA's response to any findings	Annual Plan: Annual Audit
	Troubled PHAs: MOA/Recovery Plan	Troubled PHAs
	Other supporting documents (optional) (list individually; use as many lines as necessary)	(specify as needed)

1. Statement of Housing Needs

[24 CFR Part 903.7 9 (a)]

A. Housing Needs of Families in the Jurisdiction/s Served by the PHA

Based upon the information contained in the Consolidated Plan/s applicable to the jurisdiction, and/or other data available to the PHA, provide a statement of the housing needs in the jurisdiction by completing the following table. In the "Overall" Needs column, provide the estimated number of renter families that have housing needs. For the remaining characteristics, rate the impact of that factor on the housing needs for each family type, from 1 to 5, with 1 being "no impact" and 5 being "severe impact." Use N/A to indicate that no information is available upon which the PHA can make this assessment.

Housing Needs of Families in the Jurisdiction by Family Type							
Family Type	Overall	Afford-ability	Supply	Quality	Access-ibility	Size	Loca-tion
Income <= 30% of AMI	15007 6	5	3	4	5	2	5
Income >30% but <=50% of AMI	11221 6	4	2	3	5	2	5
Income >50% but <80% of AMI	13414 12	4	1	2	4	2	5
Elderly 5932	3	5	5	5	5	1	5
Families with	4692						

Housing Needs of Families in the Jurisdiction by Family Type							
Family Type	Overall	Afford- ability	Supply	Quality	Access- ibility	Size	Loca- tion
Disabilities	3	4	4	4	5	2	5
White/ Non Hispanic	14895 22	4	3	3	2	2	5
African-American /Non Hispanic	33514 2	5	5	4	4	3	5
Hispanic	22343	5	5	4	4	3	5
Race/Ethnicity							

What sources of information did the PHA use to conduct this analysis? (Check all that apply; all materials must be made available for public inspection.)

- ☒ Consolidated Plan of the Jurisdiction/s
Indicate year: 98
- ☒ U.S. Census data: the Comprehensive Housing Affordability Strategy (“CHAS”) dataset
- ☐ American Housing Survey data
Indicate year:
- ☐ Other housing market study
Indicate year:
- ☒ Other sources: (list and indicate year of information)
Housing Authority Waiting List 2001

B. Housing Needs of Families on the Public Housing and Section 8 Tenant- Based Assistance Waiting Lists

State the housing needs of the families on the PHA's waiting list/s. **Complete one table for each type of PHA-wide waiting list administered by the PHA.** PHAs may provide separate tables for site-based or sub-jurisdictional public housing waiting lists at their option.

Housing Needs of Families on the Waiting List			
Waiting list type: (select one)			
<input type="checkbox"/> Section 8 tenant-based assistance			
<input type="checkbox"/> Public Housing			
<input checked="" type="checkbox"/> Combined Section 8 and Public Housing			
<input type="checkbox"/> Public Housing Site-Based or sub-jurisdictional waiting list (optional)			
If used, identify which development/subjurisdiction:			
	# of families	% of total families	Annual Turnover
Waiting list total	102		8
Extremely low income <=30% AMI	12	1.1	
Very low income (>30% but <=50% AMI)	25	2.4	
Low income (>50% but <80% AMI)	65	6.3	
Families with children	72	7.0	
Elderly families	15	1.4	
Families with Disabilities	15	1.4	
White/			

Housing Needs of Families on the Waiting List			
Non Hispanic	98	9.6	
African-American /Non Hispanic	4	.3	
Race/ethnicity			
Race/ethnicity			
Characteristics by Bedroom Size (Public Housing Only)	N/A		
1BR	7		
2 BR	14		
3 BR	2		
4 BR			
5 BR			
5+ BR			
<p>Is the waiting list closed (select one)? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p> <p>If yes:</p> <p>How long has it been closed (# of months)?</p> <p>Does the PHA expect to reopen the list in the PHA Plan year? <input type="checkbox"/> No <input type="checkbox"/> Yes</p> <p>Does the PHA permit specific categories of families onto the waiting list, even if generally closed? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>			

C. Strategy for Addressing Needs

- Convert 20 - 1 bedroom apartments into 10 - 2 bedroom apartments at the Beecher High Rise.
- Renovate apartments at Walnut Terrace this year.
- Fill vacancies as they become available at the Turner High Rise and Vas Homes.
- Maximize utilization of Section 8 Vouchers.

- Create a “Campus of Learning” at Walnut Terrace by converting empty apartments for use as a day care center, classroom and Lending Library for the School District would help to change public opinion and hopefully increase our appeal to those families who have a housing problem.
- Enhance our Job Training Programs and police “Call Back Services”.

Of course none of these activities can be carried out without HUD assistance. Our ongoing modernization program has improved our properties curb-side appeal and long term viability.

(1) Strategies

Need: Shortage of affordable housing for all eligible populations

Strategy 1. Maximize the number of affordable units available to the PHA within its current resources by:

Select all that apply

- ☒ Employ effective maintenance and management policies to minimize the number of public housing units off-line
- ☒ Reduce turnover time for vacated public housing units
- ☒ Reduce time to renovate public housing units
- ☐ Seek replacement of public housing units lost to the inventory through mixed finance development
- ☐ Seek replacement of public housing units lost to the inventory through section 8 replacement housing resources
- ☐ Maintain or increase section 8 lease-up rates by establishing payment standards that will enable families to rent throughout the jurisdiction
- ☐ Undertake measures to ensure access to affordable housing among families assisted by the PHA, regardless of unit size required
- ☒ Maintain or increase section 8 lease-up rates by marketing the program to owners, particularly those outside of areas of minority and poverty concentration
- ☒ Maintain or increase section 8 lease-up rates by effectively screening Section 8 applicants to increase owner acceptance of program
- ☐ Participate in the Consolidated Plan development process to ensure coordination with broader community strategies
- ☐ Other (list below)

Strategy 2: Increase the number of affordable housing units by:

Select all that apply

- ☐ Apply for additional section 8 units should they become available
- ☐ Leverage affordable housing resources in the community through the creation of mixed - finance housing
- ☐ Pursue housing resources other than public housing or Section 8 tenant-based assistance.
- ☒ Other: (list below)
Renovate existing PHA units through C.G.P.

Need: Specific Family Types: Families at or below 30% of median

Strategy 1: Target available assistance to families at or below 30 % of AMI

Select all that apply

- ☒ Exceed HUD federal targeting requirements for families at or below 30% of AMI in public housing
- ☒ Exceed HUD federal targeting requirements for families at or below 30% of AMI in tenant-based section 8 assistance
- ☒ Employ admissions preferences aimed at families with economic hardships
- ☒ Adopt rent policies to support and encourage work
- ☐ Other: (list below)

Need: Specific Family Types: Families at or below 50% of median

Strategy 1: Target available assistance to families at or below 50% of AMI

Select all that apply

- ☒ Employ admissions preferences aimed at families who are working
- ☒ Adopt rent policies to support and encourage work
- ☐ Other: (list below)

Need: Specific Family Types: The Elderly

Strategy 1: Target available assistance to the elderly:

Select all that apply

- ☐ Seek designation of public housing for the elderly
- ☐ Apply for special-purpose vouchers targeted to the elderly, should they become available
- ☒ Other: (list below)
Convert 20-1 bedroom apartments into 10-2 bedroom units

Need: Specific Family Types: Families with Disabilities

Strategy 1: Target available assistance to Families with Disabilities:

Select all that apply

- ☐ Seek designation of public housing for families with disabilities
- ☐ Carry out the modifications needed in public housing based on the section 504 Needs Assessment for Public Housing
- ☒ Apply for special-purpose vouchers targeted to families with disabilities, should they become available
- ☒ Affirmatively market to local non-profit agencies that assist families with disabilities
- ☐ Other: (list below)

Need: Specific Family Types: Races or ethnicities with disproportionate housing needs

Strategy 1: Increase awareness of PHA resources among families of races and ethnicities with disproportionate needs:

Select if applicable

- ☒ Affirmatively market to races/ethnicities shown to have disproportionate housing needs
- ☐ Other: (list below)

Strategy 2: Conduct activities to affirmatively further fair housing

Select all that apply

- ☒ Counsel section 8 tenants as to location of units outside of areas of poverty or minority concentration and assist them to locate those units
- ☐ Market the section 8 program to owners outside of areas of poverty /minority concentrations
- ☐ Other: (list below)

Other Housing Needs & Strategies: (list needs and strategies below)

(2) Reasons for Selecting Strategies

Of the factors listed below, select all that influenced the PHA's selection of the strategies it will pursue:

- ☒ Funding constraints
- ☒ Staffing constraints
- ☐ Limited availability of sites for assisted housing
- ☒ Extent to which particular housing needs are met by other organizations in the community
- ☒ Evidence of housing needs as demonstrated in the Consolidated Plan and other information available to the PHA
- ☐ Influence of the housing market on PHA programs

- ☒ Community priorities regarding housing assistance
- ☒ Results of consultation with local or state government
- ☒ Results of consultation with residents and the Resident Advisory Board
- ☐ Results of consultation with advocacy groups
- ☒ Other: (list below)
- Results of consultation with local School District
- MCHA waiting list

2. Statement of Financial Resources

[24 CFR Part 903.7 9 (b)]

List the financial resources that are anticipated to be available to the PHA for the support of Federal public housing and tenant-based Section 8 assistance programs administered by the PHA during the Plan year. Note: the table assumes that Federal public housing or tenant based Section 8 assistance grant funds are expended on eligible purposes; therefore, uses of these funds need not be stated. For other funds, indicate the use for those funds as one of the following categories: public housing operations, public housing capital improvements, public housing safety/security, public housing supportive services, Section 8 tenant-based assistance, Section 8 supportive services or other.

Financial Resources: Planned Sources and Uses		
Sources	Planned \$	Planned Uses
1. Federal Grants (FY 2001 grants)		
a) Public Housing Operating Fund	\$394,028.	Operations/security/support services
b) Public Housing Capital Fund	\$920,869.	Capital improvements
c) HOPE VI Revitalization	_____	
d) HOPE VI Demolition	_____	
e) Annual Contributions for Section 8 Tenant-Based Assistance	\$549,366.	Tenant based assistance

Financial Resources: Planned Sources and Uses		
Sources	Planned \$	Planned Uses
f) Public Housing Drug Elimination Program (including any Technical Assistance funds)	_____	
g) Resident Opportunity and Self-Sufficiency Grants	_____	
h) Community Development Block Grant	_____	
i) HOME	_____	
Other Federal Grants (list below)	_____	
2. Prior Year Federal Grants (unobligated funds only) (list below)	_____	
3. Public Housing Dwelling Rental Income	\$487,560.	Operations/security/support services
4. Other income (list below)	_____	
4. Non-federal sources (list below)	_____	

Table Library

Financial Resources: Planned Sources and Uses		
Sources	Planned \$	Planned Uses
Total resources	\$2,351,823.	

3. PHA Policies Governing Eligibility, Selection, and Admissions

[24 CFR Part 903.7 9 ©]

A. Public Housing

Exemptions: PHAs that do not administer public housing are not required to complete subcomponent 3A.

(1) Eligibility

- a. When does the PHA verify eligibility for admission to public housing? (select all that apply)
- ☐ When families are within a certain number of being offered a unit: (state number)
- ☐ When families are within a certain time of being offered a unit: (state time)
- ☒ Other: Intake
- b. Which non-income (screening) factors does the PHA use to establish eligibility for admission to public housing (select all that apply)?
- ☒ Criminal or Drug-related activity
- ☒ Rental history
- ☒ Housekeeping
- ☒ Other: Credit-able to have utilities in their name
- c. ☒ Yes ☐ No: Does the PHA request criminal records from local law enforcement agencies for screening purposes?

- d. ☒ Yes ☐ No: Does the PHA request criminal records from State law enforcement agencies for screening purposes?
- e. ☐ Yes ☒ No: Does the PHA access FBI criminal records from the FBI for screening purposes? (either directly or through an NCIC-authorized source)

(2)Waiting List Organization

- a. Which methods does the PHA plan to use to organize its public housing waiting list (select all that apply)
- ☐ Community-wide list
- ☐ Sub-jurisdictional lists
- ☒ Site-based waiting lists
- ☒ Other: Date and time
- b. Where may interested persons apply for admission to public housing?
- ☒ PHA main administrative office
- ☐ PHA development site management office
- ☐ Other (list below)
- c. If the PHA plans to operate one or more site-based waiting lists in the coming year, answer each of the following questions; if not, skip to subsection **(3) Assignment**
1. How many site-based waiting lists will the PHA operate in the coming year? 4
 2. ☐ Yes ☒ No: Are any or all of the PHA's site-based waiting lists new for the upcoming year (that is, they are not part of a previously-HUD-approved site based waiting list plan)?
If yes, how many lists?
 3. ☒ Yes ☐ No: May families be on more than one list simultaneously
If yes, how many lists? All
 4. Where can interested persons obtain more information about and sign up to be on the site-based waiting lists (select all that apply)?
☒ PHA main administrative office
☐ All PHA development management offices

- ☐ Management offices at developments with site-based waiting lists
- ☐ At the development to which they would like to apply
- ☐ Other (list below)

(3) Assignment

- a. How many vacant unit choices are applicants ordinarily given before they fall to the bottom of or are removed from the waiting list? (select one)
- ☒ One
 - ☐ Two
 - ☐ Three or more
- b. ☒ Yes ☐ No: Is this policy consistent across all waiting list types?
- c. If answer to b is no, list variations for any other than the primary public housing waiting list/s for the PHA:

(4) Admissions Preferences

- a. Income targeting:
- ☒ Yes ☐ No: Does the PHA plan to exceed the federal targeting requirements by targeting more than 40% of all new admissions to public housing to families at or below 30% of median area income?
- b. Transfer policies:
- In what circumstances will transfers take precedence over new admissions? (list below)
- ☐ Emergencies
 - ☒ Overhoused
 - ☒ Underhoused
 - ☒ Medical justification
 - ☒ Administrative reasons determined by the PHA (e.g., to permit modernization work)
 - ☐ Resident choice: (state circumstances below)
 - ☐ Other: (list below)
- c. Preferences

1. ☐ Yes ☒ No: Has the PHA established preferences for admission to public housing (other than date and time of application)? (If “no” is selected, skip to subsection **(5) Occupancy**)
2. Which of the following admission preferences does the PHA plan to employ in the coming year? (select all that apply from either former Federal preferences or other preferences)

Former Federal preferences:

- ☐ Involuntary Displacement (Disaster, Government Action, Action of Housing Owner, Inaccessibility, Property Disposition)
- ☐ Victims of domestic violence
- ☐ Substandard housing
- ☐ Homelessness
- ☐ High rent burden (rent is > 50 percent of income)

Other preferences: (select below)

- ☐ Working families and those unable to work because of age or disability
- ☐ Veterans and veterans’ families
- ☐ Residents who live and/or work in the jurisdiction
- ☐ Those enrolled currently in educational, training, or upward mobility programs
- ☐ Households that contribute to meeting income goals (broad range of incomes)
- ☐ Households that contribute to meeting income requirements (targeting)
- ☐ Those previously enrolled in educational, training, or upward mobility programs
- ☐ Victims of reprisals or hate crimes
- ☐ Other preference(s) (list below)

2. If the PHA will employ admissions preferences, please prioritize by placing a “1” in the space that represents your first priority, a “2” in the box representing your second priority, and so on. If you give equal weight to one or more of these choices (either through an absolute hierarchy or through a point system), place the same number next to each. That means you can use “1” more than once, “2” more than once, etc.

1 Date and Time

- ☐ Those enrolled currently in educational, training, or upward mobility programs
- ☐ Households that contribute to meeting income goals (broad range of incomes)
- ☐ Households that contribute to meeting income requirements (targeting)
- ☐ Those previously enrolled in educational, training, or upward mobility programs
- ☐ Victims of reprisals or hate crimes
- ☐ Other preference(s) (list below)

4. Relationship of preferences to income targeting requirements:

- ☐ The PHA applies preferences within income tiers
- ☒ Not applicable: the pool of applicant families ensures that the PHA will meet income targeting requirements

(5) Occupancy

a. What reference materials can applicants and residents use to obtain information about the rules of occupancy of public housing (select all that apply)

- ☒ The PHA-resident lease
- ☐ The PHA's Admissions and (Continued) Occupancy policy
- ☒ PHA briefing seminars or written materials
- ☐ Other source (list)

b. How often must residents notify the PHA of changes in family composition? (select all that apply)

- ☐ At an annual reexamination and lease renewal
- ☒ Any time family composition changes
- ☐ At family request for revision
- ☐ Other (list)

Component 3, (6) Deconcentration and Income Mixing

- a. ☒ Yes ☐ No: Does the PHA have any general occupancy (family) public housing developments covered by the deconcentration rule? If no, this section is complete. If yes, continue to the next question.
- b. ☐ Yes ☒ No: Do any of these covered developments have average incomes above or below 85% to 115% of the average incomes of all such developments? If no, this section is complete.

If yes, list these developments as follows:

Deconcentration Policy for Covered Developments			
Development Name:	Number of Units	Explanation (if any) [see step 4 at §903.2(c)(1)(iv)]	Deconcentration policy (if no explanation) [see step 5 at §903.2(c)(1)(v)]

B. Section 8

Exemptions: PHAs that do not administer section 8 are not required to complete sub-component 3B.

Unless otherwise specified, all questions in this section apply only to the tenant-based section 8 assistance program (vouchers, and until completely merged into the voucher program, certificates).

(1) Eligibility

- a. What is the extent of screening conducted by the PHA? (select all that apply)
- ☐ Criminal or drug-related activity only to the extent required by law or regulation
- ☒ Criminal and drug-related activity, more extensively than required by law or regulation
- ☐ More general screening than criminal and drug-related activity (list factors below)
- ☐ Other (list below)
- b. ☒ Yes ☐ No: Does the PHA request criminal records from local law enforcement agencies for screening purposes?
- c. ☒ Yes ☐ No: Does the PHA request criminal records from State law enforcement agencies for screening purposes?

d. ☒ Yes ☐ No: Does the PHA access FBI criminal records from the FBI for screening purposes? (either directly or through an NCIC-authorized source)

e. Indicate what kinds of information you share with prospective landlords? (select all that apply)

- ☒ Criminal or drug-related activity
☒ Other: Past and present landlords – name & address, phone number, if available

(2) Waiting List Organization

a. With which of the following program waiting lists is the section 8 tenant-based assistance waiting list merged? (select all that apply)

- ☒ None
☐ Federal public housing
☐ Federal moderate rehabilitation
☐ Federal project-based certificate program
☐ Other federal or local program (list below)

b. Where may interested persons apply for admission to section 8 tenant-based assistance? (select all that apply)

- ☒ PHA main administrative office
☐ Other (list below)

(3) Search Time

a. ☒ Yes ☐ No: Does the PHA give extensions on standard 60-day period to search for a unit?

If yes, state circumstances below: If repairs are taking longer or availability is scarce

(4) Admissions Preferences

a. Income targeting

☒ Yes ☐ No: Does the PHA plan to exceed the federal targeting requirements by targeting more than 75% of all new admissions to the section 8 program to families at or below 30% of median area income?

b. Preferences

1. ☒ Yes ☐ No: Has the PHA established preferences for admission to section 8 tenant-based assistance? (other than date and time of application) (if no, skip to subcomponent **(5) Special purpose section 8 assistance programs**)
2. Which of the following admission preferences does the PHA plan to employ in the _____ coming year? (select all that apply from either former Federal preferences or other _____ preferences)

Former Federal preferences

- ☐ Involuntary Displacement (Disaster, Government Action, Action of Housing Owner, Inaccessibility, Property Disposition)
- ☒ Victims of domestic violence
- ☒ Substandard housing
- ☐ Homelessness
- ☒ High rent burden (rent is > 50 percent of income)

Other preferences (select all that apply)

- ☒ Working families and those unable to work because of age or disability
- ☒ Veterans and veterans' families
- ☒ Residents who live and/or work in your jurisdiction
- ☐ Those enrolled currently in educational, training, or upward mobility programs
- ☐ Households that contribute to meeting income goals (broad range of incomes)
- ☐ Households that contribute to meeting income requirements (targeting)
- ☐ Those previously enrolled in educational, training, or upward mobility programs
- ☐ Victims of reprisals or hate crimes
- ☐ Other preference(s) (list below)

3. If the PHA will employ admissions preferences, please prioritize by placing a "1" in _____ the space that represents your first priority, a "2" in the box representing your _____ second priority, and so on. If you give equal weight to one or more of these _____ choices (either through an

absolute hierarchy or through a point system), place the same number next to each. That means you can use “1” more than once, “2” more than once, etc.

1 Date and Time

Former Federal preferences

Involuntary Displacement (Disaster, Government Action, Action of Housing Owner, Inaccessibility, Property Disposition)

2 Victims of domestic violence

3 Substandard housing
Homelessness

3 High rent burden

Other preferences (*select all that apply*)

4 Working families and those unable to work because of age or disability

4 Veterans and veterans’ families

4 Residents who live and/or work in your jurisdiction

☐ Those enrolled currently in educational, training, or upward mobility programs

☐ Households that contribute to meeting income goals (broad range of incomes)

☐ Households that contribute to meeting income requirements (targeting)

☐ Those previously enrolled in educational, training, or upward mobility programs

☐ Victims of reprisals or hate crimes

☐ Other preference(s) (list below)

4. Among applicants on the waiting list with equal preference status, how are applicants selected? (select one)

☒ Date and time of application

☐ Drawing (lottery) or other random choice technique

5. If the PHA plans to employ preferences for “residents who live and/or work in the jurisdiction” (select one)

☒ This preference has previously been reviewed and approved by HUD

☐ The PHA requests approval for this preference through this PHA Plan

6. Relationship of preferences to income targeting requirements: (select one)
- ☐ The PHA applies preferences within income tiers
- ☒ Not applicable: the pool of applicant families ensures that the PHA will meet income targeting requirements

(5) Special Purpose Section 8 Assistance Programs

- a. In which documents or other reference materials are the policies governing eligibility, selection, and admissions to any special-purpose section 8 program administered by the PHA contained? (select all that apply)
- ☒ The Section 8 Administrative Plan
- ☒ Briefing sessions and written materials
- ☐ Other (list below)
- b. How does the PHA announce the availability of any special-purpose section 8 programs to the public?
- ☒ Through published notices
- ☐ Other (list below)

4. PHA Rent Determination Policies

[24 CFR Part 903.7 9 (d)]

A. Public Housing

Exemptions: PHAs that do not administer public housing are not required to complete sub-component 4A.

(1) Income Based Rent Policies

Describe the PHA's income based rent setting policy/ies for public housing using, including discretionary (that is, not required by statute or regulation) income disregards and exclusions, in the appropriate spaces below.

- a. Use of discretionary policies: (select one)

☐ The PHA will not employ any discretionary rent-setting policies for income based rent in public housing. Income-based rents are set at the higher of 30% of adjusted monthly income, 10% of unadjusted monthly income, the welfare rent, or minimum rent (less HUD mandatory deductions and exclusions). (If selected, skip to sub-component (2))

---or---

☒ The PHA employs discretionary policies for determining income based rent (If selected, continue to question b.)

b. Minimum Rent

1. What amount best reflects the PHA's minimum rent? (select one)

- ☐ \$0
☐ \$1-\$25
☒ \$26-\$50

2. ☒ Yes ☐ No: Has the PHA adopted any discretionary minimum rent hardship exemption policies?

3. If yes to question 2, list these policies below:

Elderly/disabled – no income families

c. Rents set at less than 30% than adjusted income

1. ☒ Yes ☐ No: Does the PHA plan to charge rents at a fixed amount or percentage less than 30% of adjusted income?

2. If yes to above, list the amounts or percentages charged and the circumstances under which these will be used below:
\$5.00 fixed rent for residents temporarily in nursing home, that all income goes to nursing home care.

d. Which of the discretionary (optional) deductions and/or exclusions policies does the PHA plan to employ (select all that apply)

- ☒ For the earned income of a previously unemployed household member
☐ For increases in earned income
☐ Fixed amount (other than general rent-setting policy)

If yes, state amount/s and circumstances below:

☐ Fixed percentage (other than general rent-setting policy)

If yes, state percentage/s and circumstances below:

- ☐ For household heads
- ☐ For other family members
- ☐ For transportation expenses
- ☐ For the non-reimbursed medical expenses of non-disabled or non-elderly families
- ☐ Other (describe below)

e. Ceiling rents

1. Do you have ceiling rents? (rents set at a level lower than 30% of adjusted income) (select one)

- ☒ Yes for all developments
- ☐ Yes but only for some developments
- ☐ No

2. For which kinds of developments are ceiling rents in place? (select all that apply)

- ☒ For all developments
- ☐ For all general occupancy developments (not elderly or disabled or elderly only)
- ☐ For specified general occupancy developments
- ☐ For certain parts of developments; e.g., the high-rise portion
- ☐ For certain size units; e.g., larger bedroom sizes
- ☐ Other (list below)

3. Select the space or spaces that best describe how you arrive at ceiling rents (select all that apply)

- ☐ Market comparability study
- ☐ Fair market rents (FMR)
- ☐ 95th percentile rents
- ☐ 75 percent of operating costs
- ☐ 100 percent of operating costs for general occupancy (family) developments
- ☒ Operating costs plus debt service

- ☐ The “rental value” of the unit
☐ Other (list below)

f. Rent re-determinations:

1. Between income reexaminations, how often must tenants report changes in income or family composition to the PHA such that the changes result in an adjustment to rent? (select all that apply)

- ☐ Never
☐ At family option
☒ Any time the family experiences an income increase
☐ Any time a family experiences an income increase above a threshold amount or percentage: (if selected, specify threshold)_____
☒ Other (list below)

1. Anytime there are changes to income or family composition

- g. ☐ Yes ☒ No: Does the PHA plan to implement individual savings accounts for residents (ISAs) as an alternative to the required 12 month disallowance of earned income and phasing in of rent increases in the next year?

(2) Flat Rents

1. In setting the market-based flat rents, what sources of information did the PHA use to establish comparability? (select all that apply.)

- ☐ The section 8 rent reasonableness study of comparable housing
☐ Survey of rents listed in local newspaper
☐ Survey of similar unassisted units in the neighborhood
☒ Other (list/describe below)

Used ceiling rents

B. Section 8 Tenant-Based Assistance

Exemptions: PHAs that do not administer Section 8 tenant-based assistance are not required to complete sub-component 4B. Unless otherwise specified, all questions in this section apply only to the tenant-based section 8 assistance program (vouchers, and until completely merged into the voucher program, certificates).

(1) Payment Standards

Describe the voucher payment standards and policies.

a. What is the PHA's payment standard? (select the category that best describes your standard)

- ☐ At or above 90% but below 100% of FMR
- ☒ 100% of FMR
- ☐ Above 100% but at or below 110% of FMR
- ☐ Above 110% of FMR (if HUD approved; describe circumstances below)

b. If the payment standard is lower than FMR, why has the PHA selected this standard? (select all that apply)

- ☐ FMRs are adequate to ensure success among assisted families in the PHA's segment of the FMR area
- ☐ The PHA has chosen to serve additional families by lowering the payment standard
- ☐ Reflects market or submarket
- ☐ Other (list below)

c. If the payment standard is higher than FMR, why has the PHA chosen this level? (select all that apply)

- ☐ FMRs are not adequate to ensure success among assisted families in the PHA's segment of the FMR area
- ☐ Reflects market or submarket
- ☐ To increase housing options for families
- ☐ Other (list below)

d. How often are payment standards reevaluated for adequacy? (select one)

- ☒ Annually
- ☐ Other (list below)

e. What factors will the PHA consider in its assessment of the adequacy of its payment standard? (select all that apply)

- ☒ Success rates of assisted families

- ☐ Rent burdens of assisted families
☐ Other (list below)

(2) Minimum Rent

- a. What amount best reflects the PHA's minimum rent? (select one)
- ☒ \$0
☐ \$1-\$25
☐ \$26-\$50
- b. ☐ Yes ☒ No: Has the PHA adopted any discretionary minimum rent hardship exemption policies? (if yes, list below)

5. Operations and Management

[24 CFR Part 903.7 9 (e)]

Exemptions from Component 5: High performing and small PHAs are not required to complete this section. Section 8 only PHAs must complete parts A, B, and C(2)

A. PHA Management Structure

Describe the PHA's management structure and organization.

(select one)

- ☐ An organization chart showing the PHA's management structure and organization is available upon request.
☒ A brief description of the management structure and organization of the PHA follows:

- Executive Director
- Maintenance Director
- Section 8 Occupancy Specialist
- Public Housing Occupancy Specialist
- Bookkeeper

- Receptionist/Secretary
- Social Service Coordinator
- Maintenance Supervisor

B. HUD Programs Under PHA Management

– List Federal programs administered by the PHA, number of families served at the beginning of the upcoming fiscal year, and expected turnover in each. (Use “NA” to indicate that the PHA does not operate any of the programs listed below.)

Program Name	Units or Families Served at Year Beginning	Expected Turnover
Public Housing	404	15
Section 8 Vouchers	148	9
Section 8 Certificates	28	1
Section 8 Mod Rehab	N/A	N/A
Special Purpose Section 8 Certificates/Vouchers (list individually)	N/A	N/A
Public Housing Drug Elimination Program (PHDEP)	N/A	N/A
Other Federal Programs(list individually)	N/A	N/A

C. Management and Maintenance Policies

List the PHA's public housing management and maintenance policy documents, manuals and handbooks that contain the Agency's rules, standards, and policies that govern maintenance and management of public housing, including a description of any measures necessary for the prevention or eradication of pest infestation (which includes cockroach infestation) and the policies governing Section 8 management.

(1) Public Housing Maintenance and Management: (list below)

Maintenance Policy Plan, Admin Plan, PHA Admin Plan

- Admissions and Continued Occupancy Policy
- Blood Born Disease Policy
- Capitalization Policy
- Community Space Policy
- Check Signing Policy
- Criminal Records Management Policy
- Drug Free Policy
- Equal Housing Opportunity Policy
- Ethics Policy
- Hazardous Materials Policy
- Investment Policy
- Maintenance Policy
- Natural Disaster Policy
- Personnel Policy
- Procurement Policy

(2) Section 8 Management: (list below)

- Section 8 Administrative Plan

6. PHA Grievance Procedures

[24 CFR Part 903.7 9 (f)]

Exemptions from component 6: High performing PHAs are not required to complete component 6. Section 8-Only PHAs are exempt from sub-component 6A.

A. Public Housing

1. ☐ Yes ☒ No: Has the PHA established any written grievance procedures in addition to federal requirements found at 24 CFR Part 966, Subpart B, for residents of public housing?

If yes, list additions to federal requirements below:

2. Which PHA office should residents or applicants to public housing contact to initiate the PHA grievance process? (select all that apply)
- ☒ PHA main administrative office
- ☐ PHA development management offices
- ☐ Other (list below)

B. Section 8 Tenant-Based Assistance

1. ☐ Yes ☒ No: Has the PHA established informal review procedures for applicants to the Section 8 tenant-based assistance program and informal hearing procedures for families assisted by the Section 8 tenant-based assistance program in addition to federal requirements found at 24 CFR 982?

If yes, list additions to federal requirements below:

2. Which PHA office should applicants or assisted families contact to initiate the informal review and informal hearing processes? (select all that apply)
- ☒ PHA main administrative office
- ☐ Other (list below)

7. Capital Improvement Needs

[24 CFR Part 903.7 9 (g)]

Exemptions from Component 7: Section 8 only PHAs are not required to complete this component and may skip to Component 8.

A. Capital Fund Activities

Exemptions from sub-component 7A: PHAs that will not participate in the Capital Fund Program may skip to component 7B. All other PHAs must complete 7A as instructed.

(1) Capital Fund Program Annual Statement

Using parts I, II, and III of the Annual Statement for the Capital Fund Program (CFP), identify capital activities the PHA is proposing for the upcoming year to ensure long-term physical and social viability of its public housing developments. This statement can be completed by using the CFP Annual Statement tables provided in the table library at the end of the PHA Plan template **OR**, at the PHA’s option, by completing and attaching a properly updated HUD-52837.

Select one:

☐ The Capital Fund Program Annual Statement is provided as an attachment to the PHA Plan at Attachment (state name)

- or-

☒ The Capital Fund Program Annual Statement is provided below:

PHA Plan
Table Library

Component 7
Capital Fund Program Annual Statement
Parts I, II, and II

Annual Statement
Capital Fund Program (CFP) Part I: Summary
Capital Fund Grant Number IL06P07950101 FFY of Grant Approval: (FFY 2001)
☒ Original Annual Statement

Line No.	Summary by Development Account	Total Estimated Cost
----------	--------------------------------	----------------------

1	Total Non-CGP Funds	
2	1406 Operations	66,760
3	1408 Management Improvements	74,000
4	1410 Administration	
5	1411 Audit	
6	1415 Liquidated Damages	
7	1430 Fees and Costs	59,500
8	1440 Site Acquisition	
9	1450 Site Improvement	31,772
10	1460 Dwelling Structures	663,140
11	1465.1 Dwelling Equipment-Non-expendable	16,800
12	1470 Non-dwelling Structures	
13	1475 Non-dwelling Equipment	
14	1485 Demolition	
15	1490 Replacement Reserve	
16	1492 Moving to Work Demonstration	
17	1495.1 Relocation Costs	13,000
18	1498 Mod Used for Development	
19	1502 Contingency	
20	Amount of Annual Grant (Sum of lines 2-19)	924,972
21	Amount of line 20 Related to LBP Activities	
22	Amount of line 20 Related to Section 504 Compliance	
23	Amount of line 20 Related to Security	30,000.
24	Amount of line 20 Related to Energy Conservation Measures	

Annual Statement

Capital Fund Program (CFP) Part II: Supporting Table

Development Number/Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Total Estimated Cost
<u>IL06P079001</u> <u>WALNUT</u> <u>TERRACE</u>	Complete upgrade of low-income family dwelling units including kitchens, bathrooms, closets, interior doors, exterior doors, floors, interior and exterior painting, gutter repair, 220 outlet for dryers and vent, new showers, washer drain repairs.	1460	663,140
<u>PHA Wide</u>	Purchase new stoves and refrigerators Upgrade existing parking areas (patch/seal-coat)	1465.1 1450.	16,800 31,772

Annual Statement
Capital Fund Program (CFP) Part II: Supporting Table

Development Number/Name	General Description of Major Work Categories	Development Account	Total Estimated
----------------------------	---	------------------------	--------------------

HA-Wide Activities		Number	Cost
<u>PHA WIDE</u>	<u>Operations</u> PHA costs associated with CGP	1406.	66,760.
	<u>Management Improvements</u> Basic Building Maintenance Job Training Program	1408.	44,000.
	Security – Police Call-Back services	1408.	30,000.
<u>PHA WIDE</u>	<u>A & E</u> Hire architect and engineer for design work	1430.	59,500.
	<u>Relocation Costs</u> Costs associated to the relocation of residents due to work	1495.1	13,000

Annual Statement
Capital Fund Program (CFP) Part III: Implementation Schedule

Development Number/Name HA-Wide Activities	All Funds Obligated (Quarter Ending Date)	All Funds Expended (Quarter Ending Date)
<u>IL06P079001</u> <u>WALNUT</u> <u>TERRACE</u>	09/30/03	09/30/05
<u>PHA WIDE</u> Site Improvement	09/30/03	09/30/05

(2) Optional 5-Year Action Plan

Agencies are encouraged to include a 5-Year Action Plan covering capital work items. This statement can be completed by using the 5 Year Action Plan table provided in the table library at the end of the PHA Plan template **OR** by completing and attaching a properly updated HUD-52834.

a. ☒ Yes ☐ No: Is the PHA providing an optional 5-Year Action Plan for the Capital Fund? (if no, skip to sub-component 7B)

Table Library

b. If yes to question a, select one:

☒ The Capital Fund Program 5-Year Action Plan is provided as an attachment to the PHA Plan at Attachment (P&E Report il079a01)

• or-

☐ The Capital Fund Program 5-Year Action Plan is provided below:

B. HOPE VI and Public Housing Development and Replacement Activities (Non-Capital Fund)

Applicability of sub-component 7B:

All PHAs administering public housing. Identify any approved HOPE VI and/or public housing development or replacement activities not described in the Capital Fund Program Annual Statement.

☐ Yes ☒ No: a) Has the PHA received a HOPE VI revitalization grant? (if no, skip to question c; if yes, provide responses to question b for each grant, copying and completing as many times as necessary)

b) Status of HOPE VI revitalization grant (complete one set of questions for each grant)

1. Development name:

2. Development (project) number:

3. Status of grant: (select the statement that best describes the current status)

- ☐ Revitalization Plan under development
- ☐ Revitalization Plan submitted, pending approval
- ☐ Revitalization Plan approved
- ☐ Activities pursuant to an approved Revitalization Plan underway

☐ Yes ☒ No: c) Does the PHA plan to apply for a HOPE VI Revitalization grant in the Plan year?
If yes, list development name/s below:

☐ Yes ☒ No: d) Will the PHA be engaging in any mixed-finance development activities for public housing in the Plan year?
If yes, list developments or activities below:

- ☐ Yes ☒ No: e) Will the PHA be conducting any other public housing development or replacement activities not discussed in the Capital Fund Program Annual Statement?
If yes, list developments or activities below:

8. Demolition and Disposition

[24 CFR Part 903.7 9 (h)]

Applicability of component 8: Section 8 only PHAs are not required to complete this section.

1. ☐ Yes ☒ No: Does the PHA plan to conduct any demolition or disposition activities (pursuant to section 18 of the U.S. Housing Act of 1937 (42 U.S.C. 1437p)) in the plan Fiscal Year? (If “No”, skip to component 9; if “yes”, complete one activity description for each development.)

2. Activity Description

☒ Yes ☐ No: Has the PHA provided the activities description information in the **optional** Public Housing Asset Management Table? (If “yes”, skip to component 9. If “No”, complete the Activity Description table below.)

Demolition/Disposition Activity Description
1a. Development name:
1b. Development (project) number:
2. Activity type: Demolition <input type="checkbox"/> Disposition <input type="checkbox"/>
3. Application status (select one) Approved <input type="checkbox"/> Submitted, pending approval <input type="checkbox"/> Planned application <input type="checkbox"/>
4. Date application approved, submitted, or planned for submission: <u>(DD/MM/YY)</u>
5. Number of units affected:
6. Coverage of action (select one) <input type="checkbox"/> Part of the development <input type="checkbox"/> Total development
7. Timeline for activity: a. Actual or projected start date of activity: b. Projected end date of activity:

9. Designation of Public Housing for Occupancy by Elderly Families or Families with Disabilities or Elderly Families and Families with Disabilities

[24 CFR Part 903.7 9 (i)]

Exemptions from Component 9; Section 8 only PHAs are not required to complete this section.

1. ☒ Yes ☐ No: Has the PHA designated or applied for approval to designate or does the PHA plan to apply to designate any public housing for occupancy only by the elderly families or only by families with disabilities, or by elderly families and families with disabilities or will apply for designation for occupancy by only elderly families or only families with disabilities, or by elderly families and families with disabilities as provided by section 7 of the U.S. Housing Act of 1937 (42 U.S.C. 1437e) in the upcoming fiscal year? (If “No”, skip to component 10. If “yes”, complete one activity description for each development, unless the PHA is eligible to complete a streamlined submission; PHAs completing streamlined submissions may skip to component 10.)

2. Activity Description

☒ Yes ☐ No: Has the PHA provided all required activity description information for this component in the **optional** Public Housing Asset Management Table? If “yes”, skip to component 10. If “No”, complete the Activity Description table below.

Designation of Public Housing Activity Description
1a. Development name: Beecher High Rise and Beecher Cottages
1b. Development (project) number: IL 79-2
2. Designation type: Occupancy by only the elderly <input type="checkbox"/> Occupancy by families with disabilities <input type="checkbox"/> Occupancy by only elderly families and families with disabilities <input checked="" type="checkbox"/>
3. Application status (select one) Approved; included in the PHA's Designation Plan <input checked="" type="checkbox"/> Submitted, pending approval <input type="checkbox"/> Planned application <input type="checkbox"/>

4. Date this designation approved, submitted, or planned for submission: <u>(7/30/97)</u>
5. If approved, will this designation constitute a (select one) <input type="checkbox"/> New Designation Plan <input checked="" type="checkbox"/> Revision of a previously-approved Designation Plan?
6. Number of units affected: 196
7. Coverage of action (select one) <input type="checkbox"/> Part of the development <input checked="" type="checkbox"/> Total development

10. Conversion of Public Housing to Tenant-Based Assistance

[24 CFR Part 903.7 9 (j)]

Exemptions from Component 10; Section 8 only PHAs are not required to complete this section.

A. Assessments of Reasonable Revitalization Pursuant to section 202 of the HUD FY 1996 HUD Appropriations Act

1. ☐ Yes ☒ No: Have any of the PHA's developments or portions of developments been identified by HUD or the PHA as covered under section 202 of the HUD FY 1996 HUD Appropriations Act? (If "No", skip to component 11; if "yes", complete one activity description for each identified development, unless eligible to complete a streamlined submission. PHAs completing streamlined submissions may skip to component 11.)

2. Activity Description

☐ Yes ☐ No: Has the PHA provided all required activity description information for this component in the **optional** Public Housing Asset Management Table? If "yes", skip to component 11. If "No", complete the Activity Description table below.

Conversion of Public Housing Activity Description
1a. Development name:
1b. Development (project) number:
2. What is the status of the required assessment? <input type="checkbox"/> Assessment underway <input type="checkbox"/> Assessment results submitted to HUD <input type="checkbox"/> Assessment results approved by HUD (if marked, proceed to next question) <input type="checkbox"/> Other (explain below)

<p>3. <input type="checkbox"/> Yes <input type="checkbox"/> No: Is a Conversion Plan required? (If yes, go to block 4; if no, go to block 5.)</p>
<p>4. Status of Conversion Plan (select the statement that best describes the current status)</p> <p><input type="checkbox"/> Conversion Plan in development</p> <p><input type="checkbox"/> Conversion Plan submitted to HUD on: (DD/MM/YYYY)</p> <p><input type="checkbox"/> Conversion Plan approved by HUD on: (DD/MM/YYYY)</p> <p><input type="checkbox"/> Activities pursuant to HUD-approved Conversion Plan underway</p>
<p>5. Description of how requirements of Section 202 are being satisfied by means other than conversion (select one)</p> <p><input type="checkbox"/> Units addressed in a pending or approved demolition application (date submitted or approved: _____)</p> <p><input type="checkbox"/> Units addressed in a pending or approved HOPE VI demolition application (date submitted or approved: _____)</p> <p><input type="checkbox"/> Units addressed in a pending or approved HOPE VI Revitalization Plan (date submitted or approved: _____)</p> <p><input type="checkbox"/> Requirements no longer applicable: vacancy rates are less than 10 percent</p> <p><input type="checkbox"/> Requirements no longer applicable: site now has less than 300 units</p> <p><input type="checkbox"/> Other: (describe below)</p>

<p>B. Reserved for Conversions pursuant to Section 22 of the U.S. Housing Act of 1937</p>
--

<p>C. Reserved for Conversions pursuant to Section 33 of the U.S. Housing Act of 1937</p>
--

11. Homeownership Programs Administered by the PHA

[24 CFR Part 903.7 9 (k)]

A. Public Housing

Exemptions from Component 11A: Section 8 only PHAs are not required to complete 11A.

1. ☐ Yes ☒ No: Does the PHA administer any homeownership programs administered by the PHA under an approved section 5(h) homeownership program (42 U.S.C. 1437c(h)), or an approved HOPE I program (42 U.S.C. 1437aaa) or has the PHA applied or plan to apply to administer any homeownership programs under section 5(h), the HOPE I program, or section 32 of the U.S. Housing Act of 1937 (42 U.S.C. 1437z-4). (If “No”, skip to component 11B; if “yes”, complete one activity description for each applicable program/plan, unless eligible to complete a streamlined submission due to **small PHA** or **high performing PHA** status. PHAs completing streamlined submissions may skip to component 11B.)

2. Activity Description

☐ Yes ☐ No: Has the PHA provided all required activity description information for this component in the **optional** Public Housing Asset Management Table? (If “yes”, skip to component 12. If “No”, complete the Activity Description table below.)

Public Housing Homeownership Activity Description (Complete one for each development affected)
1a. Development name: 1b. Development (project) number:
2. Federal Program authority: <input type="checkbox"/> HOPE I <input type="checkbox"/> 5(h) <input type="checkbox"/> Turnkey III <input type="checkbox"/> Section 32 of the USHA of 1937 (effective 10/1/99)
3. Application status: (select one) <input type="checkbox"/> Approved; included in the PHA’s Homeownership Plan/Program <input type="checkbox"/> Submitted, pending approval <input type="checkbox"/> Planned application
4. Date Homeownership Plan/Program approved, submitted, or planned for submission: (DD/MM/YYYY)
5. Number of units affected: 6. Coverage of action: (select one) <input type="checkbox"/> Part of the development

☐ Total development

B. Section 8 Tenant Based Assistance

1. ☐ Yes ☒ No: Does the PHA plan to administer a Section 8 Homeownership program pursuant to Section 8(y) of the U.S.H.A. of 1937, as implemented by 24 CFR part 982 ? (If “No”, skip to component 12; if “yes”, describe each program using the table below (copy and complete questions for each program identified), unless the PHA is eligible to complete a streamlined submission due to high performer status. **High performing PHAs** may skip to component 12.)

2. Program Description:

a. Size of Program

☐ Yes ☐ No: Will the PHA limit the number of families participating in the section 8 homeownership option?

If the answer to the question above was yes, which statement best describes the number of participants? (select one)

- ☐ 25 or fewer participants
- ☐ 26 - 50 participants
- ☐ 51 to 100 participants
- ☐ more than 100 participants

b. *PHA-established eligibility criteria*

☐ Yes ☐ No: Will the PHA’s program have eligibility criteria for participation in its Section 8 Homeownership Option program in addition to HUD criteria?

If yes, list criteria below:

12. PHA Community Service and Self-sufficiency Programs

[24 CFR Part 903.7 9 (l)]

Exemptions from Component 12: High performing and small PHAs are not required to complete this component. Section 8-Only PHAs are not required to complete sub-component C.

A. PHA Coordination with the Welfare (TANF) Agency

1. Cooperative agreements:

☒ Yes ☐ No: Has the PHA has entered into a cooperative agreement with the TANF Agency, to share information and/or target supportive services (as contemplated by section 12(d)(7) of the Housing Act of 1937)?

If yes, what was the date that agreement was signed? **10/10/00**

2. Other coordination efforts between the PHA and TANF agency (select all that apply)

- ☒ Client referrals
- ☒ Information sharing regarding mutual clients (for rent determinations and otherwise)
- ☒ Coordinate the provision of specific social and self-sufficiency services and programs to eligible families
- ☐ Jointly administer programs
- ☐ Partner to administer a HUD Welfare-to-Work voucher program
- ☐ Joint administration of other demonstration program
- ☐ Other (describe)

B. Services and programs offered to residents and participants

(1) General

a. Self-Sufficiency Policies

Which, if any of the following discretionary policies will the PHA employ to enhance the economic and social self-sufficiency of assisted families in the following areas? (select all that apply)

- ☒ Public housing rent determination policies
- ☐ Public housing admissions policies
- ☐ Section 8 admissions policies
- ☒ Preference in admission to section 8 for certain public housing families
- ☒ Preferences for families working or engaging in training or education programs for non-housing programs operated or coordinated by the PHA
- ☐ Preference/eligibility for public housing homeownership option participation
- ☐ Preference/eligibility for section 8 homeownership option participation
- ☐ Other policies (list below)

b. Economic and Social self-sufficiency programs

☒ Yes ☐ No: Does the PHA coordinate, promote or provide any programs to enhance the economic and social self-sufficiency of residents? (If “yes”, complete the following table; if “no” skip to sub-component 2, Family Self Sufficiency Programs. The position of the table may be altered to facilitate its use.)

Services and Programs				
Program Name & Description (including location, if appropriate)	Estimated Size	Allocation Method (waiting list/random selection/specific criteria/other)	Access (development office / PHA main office / other provider name)	Eligibility (public housing or section 8 participants or both)
Parent House	20-30	Specific criteria	School District #117	Both
Pre-Kg	40-50	Specific criteria	School District #117	Both
Head Start	30-40	Specific criteria	Urban League	Both
YMCA Out Reach	40-60	Random selection	YMCA	Both
Camp Hope	60-100	Random selection	Wells Center/YMCA	Both
Basic Building Maintenance	3-4	Random selection	MCHA Main Office	PHA
500 Club	10-20	Specific criteria	Council on Aging	PHA

(2) Family Self Sufficiency program/s

a. Participation Description

Family Self Sufficiency (FSS) Participation		
Program	Required Number of Participants (start of FY 2000 Estimate)	Actual Number of Participants (As of: DD/MM/YY)
Public Housing		

	0	
Section 8	0	

- b. ☒ Yes ☐ No: If the PHA is not maintaining the minimum program size required by HUD, does the most recent FSS Action Plan address the steps the PHA plans to take to achieve at least the minimum program size?
If no, list steps the PHA will take below:

We are not required to provide FSS.

C. Welfare Benefit Reductions

1. The PHA is complying with the statutory requirements of section 12(d) of the U.S. Housing Act of 1937 (relating to the treatment of income changes resulting from welfare program requirements) by: (select all that apply)

- ☒ Adopting appropriate changes to the PHA's public housing rent determination policies and train staff to carry out those policies
☒ Informing residents of new policy on admission and reexamination
☐ Actively notifying residents of new policy at times in addition to admission and reexamination.
☐ Establishing or pursuing a cooperative agreement with all appropriate TANF agencies regarding the exchange of information and coordination of services
☐ Establishing a protocol for exchange of information with all appropriate TANF agencies
☐ Other: (list below)

D. Reserved for Community Service Requirement pursuant to section 12© of the U.S. Housing Act of 1937

- ☒ Yes ☐ No: The Community Service Policy is an Attachment. (Attachment Filename: il079g01)

13. PHA Safety and Crime Prevention Measures

[24 CFR Part 903.7 9 (m)]

Exemptions from Component 13: High performing and small PHAs not participating in PHDEP and Section 8 Only PHAs may skip to component 15. High Performing and small PHAs that are participating in PHDEP and are submitting a PHDEP Plan with this PHA Plan may skip to sub-component D.

A. Need for measures to ensure the safety of public housing residents

1. Describe the need for measures to ensure the safety of public housing residents (select all that apply)

- ☐ High incidence of violent and/or drug-related crime in some or all of the PHA's developments
- ☐ High incidence of violent and/or drug-related crime in the areas surrounding or adjacent to the PHA's developments
- ☒ Residents fearful for their safety and/or the safety of their children
- ☒ Observed lower-level crime, vandalism and/or graffiti
- ☒ People on waiting list unwilling to move into one or more developments due to perceived and/or actual levels of violent and/or drug-related crime
- ☐ Other (describe below)

2. What information or data did the PHA use to determine the need for PHA actions to improve safety of residents (select all that apply).

- ☐ Safety and security survey of residents
- ☒ Analysis of crime statistics over time for crimes committed "in and around" public housing authority
- ☐ Analysis of cost trends over time for repair of vandalism and removal of graffiti
- ☒ Resident reports
- ☒ PHA employee reports
- ☒ Police reports
- ☒ Demonstrable, quantifiable success with previous or ongoing anticrime/anti drug programs
- ☐ Other (describe below)

3. Which developments are most affected? (list below)

- Walnut Terrace IL 79-1
- VAS Homes IL 79-2

B. Crime and Drug Prevention activities the PHA has undertaken or plans to undertake in the next PHA fiscal year

1. List the crime prevention activities the PHA has undertaken or plans to undertake: (select all that apply)

- ☐ Contracting with outside and/or resident organizations for the provision of crime- and/or drug-prevention activities
- ☐ Crime Prevention Through Environmental Design
- ☒ Activities targeted to at-risk youth, adults, or seniors
- ☐ Volunteer Resident Patrol/Block Watchers Program
- ☒ Other (describe below)
Police "Call Back Services"

2. Which developments are most affected?

- Walnut Terrace IL 79-1
- VAS Homes IL 79-2

C. Coordination between PHA and the police

1. Describe the coordination between the PHA and the appropriate police precincts for carrying out crime prevention measures and activities: (select all that apply)

- ☒ Police involvement in development, implementation, and/or ongoing evaluation of drug-elimination plan
- ☒ Police provide crime data to housing authority staff for analysis and action
- ☒ Police have established a physical presence on housing authority property (e.g., community policing office, officer in residence)
- ☐ Police regularly testify in and otherwise support eviction cases
- ☒ Police regularly meet with the PHA management and residents
- ☒ Agreement between PHA and local law enforcement agency for provision of above-baseline law enforcement services
- ☐ Other activities (list below)

2. Which developments are most affected? (list below)

- Walnut Terrace IL 79-1
- VAS Homes IL 79-2

D. Additional information as required by PHDEP/PHDEP Plan

PHAs eligible for FY 2000 PHDEP funds must provide a PHDEP Plan meeting specified requirements prior to receipt of PHDEP funds.

- ☐ Yes ☒ No: Is the PHA eligible to participate in the PHDEP in the fiscal year covered by this PHA Plan?
- ☐ Yes ☒ No: Has the PHA included the PHDEP Plan for FY 2000 in this PHA Plan?
- ☐ Yes ☒ No: This PHDEP Plan is an Attachment. (Attachment Filename: ____)

14. RESERVED FOR PET POLICY

[24 CFR Part 903.7 9 (n)]

☒ Yes ☐ No: The Pet Policy is an Attachment. (Attachment Filename: il079e01)

15. Civil Rights Certifications

[24 CFR Part 903.7 9 (o)]

Civil rights certifications are included in the PHA Plan Certifications of Compliance with the PHA Plans and Related Regulations.

16. Fiscal Audit

[24 CFR Part 903.7 9 (p)]

1. ☒ Yes ☐ No: Is the PHA required to have an audit conducted under section 5(h)(2) of the U.S. Housing Act of 1937 (42 U.S.C. 1437c(h))? (If no, skip to component 17.)
2. ☒ Yes ☐ No: Was the most recent fiscal audit submitted to HUD?
3. ☐ Yes ☒ No: Were there any findings as the result of that audit?
4. ☐ Yes ☐ No: If there were any findings, do any remain unresolved?
If yes, how many unresolved findings remain? _____
5. ☐ Yes ☐ No: Have responses to any unresolved findings been submitted to HUD?
If not, when are they due (state below)?

17. PHA Asset Management

[24 CFR Part 903.7 9 (q)]

Exemptions from component 17: Section 8 Only PHAs are not required to complete this component. High performing and small PHAs are not required to complete this component.

1. ☒ Yes ☐ No: Is the PHA engaging in any activities that will contribute to the long-term asset management of its public housing stock, including how the Agency will plan for long-term operating, capital investment, rehabilitation, modernization, disposition, and other needs that have **not** been addressed elsewhere in this PHA Plan?
2. What types of asset management activities will the PHA undertake? (select all that apply)
 - ☒ Not applicable
 - ☐ Private management
 - ☐ Development-based accounting
 - ☐ Comprehensive stock assessment
 - ☐ Other: (list below)

3. ☐ Yes ☒ No: Has the PHA included descriptions of asset management activities in the **optional** Public Housing Asset Management Table?

18. Other Information

[24 CFR Part 903.7 9 ®]

A. Resident Advisory Board Recommendations

1. ☒ Yes ☐ No: Did the PHA receive any comments on the PHA Plan from the Resident Advisory Board/s?

2. If yes, the comments are: (if comments were received, the PHA **MUST** select one)

☒ Attached at Attachment (File name) Resident Comments il079f01

☐ Provided below:

3. In what manner did the PHA address those comments? (select all that apply)

☒ Considered comments, but determined that no changes to the PHA Plan were necessary.

☐ The PHA changed portions of the PHA Plan in response to comments

List changes below:

☐ Other: (list below)

B. Description of Election process for Residents on the PHA Board

1. ☐ Yes ☒ No: Does the PHA meet the exemption criteria provided section 2(b)(2) of the U.S. Housing Act of 1937? (If no, continue to question 2; if yes, skip to sub-component C.)

2. ☐ Yes ☒ No: Was the resident who serves on the PHA Board elected by the residents? (If yes, continue to question 3; if no, skip to sub-component C.)

3. Description of Resident Election Process

a. Nomination of candidates for place on the ballot: (select all that apply)

☐ Candidates were nominated by resident and assisted family organizations

☐ Candidates could be nominated by any adult recipient of PHA assistance

☐ Self-nomination: Candidates registered with the PHA and requested a place on ballot

☐ Other: (describe)

b. Eligible candidates: (select one)

- ☐ Any recipient of PHA assistance
- ☐ Any head of household receiving PHA assistance
- ☐ Any adult recipient of PHA assistance
- ☐ Any adult member of a resident or assisted family organization
- ☐ Other (list)

c. Eligible voters: (select all that apply)

- ☐ All adult recipients of PHA assistance (public housing and section 8 tenant-based assistance)
- ☐ Representatives of all PHA resident and assisted family organizations
- ☐ Other (list)

C. Statement of Consistency with the Consolidated Plan

For each applicable Consolidated Plan, make the following statement (copy questions as many times as necessary).

1. Consolidated Plan jurisdiction: Region 4 non-metro

2. The PHA has taken the following steps to ensure consistency of this PHA Plan with the Consolidated Plan for the jurisdiction: (select all that apply)

- ☒ The PHA has based its statement of needs of families in the jurisdiction on the needs expressed in the Consolidated Plan/s.
- ☐ The PHA has participated in any consultation process organized and offered by the Consolidated Plan agency in the development of the Consolidated Plan.
- ☐ The PHA has consulted with the Consolidated Plan agency during the development of this PHA Plan.
- ☒ Activities to be undertaken by the PHA in the coming year are consistent with the initiatives contained in the Consolidated Plan. (list below)
The Beecher High Rise and Cottages, Project IL 79-2 have been designated elderly/disabled only.
We are modernizing our low-income family developments making them available to families in need.
We are targeting the extremely low-income , < 30% AMI, in both our PHA and Section 8 programs.
We are focusing on job training, self-sufficiency activities for our low-income

☐ families.
☐ Other: (list below)

3. The Consolidated Plan of the jurisdiction supports the PHA Plan with the following actions and commitments: (describe below)
- The IHDA has certified that our Agency Plan is consistent with the State of
 - Illinois Consolidated Plan.

D. Other Information Required by HUD

☒ Yes ☐ No: The Deviation Statement is an Attachment. (Attachment Filename: il079h01)

Attachments

Use this section to provide any additional attachments referenced in the Plans.

- **Optional 5 Year Plan**
- **P&E Report il079a01**
- **Deconcentration il079b01**
- **Progress Report il079c01**
- **RAB il079d01**
- **Pet Policy il079e01**
- **Resident Comments il079f01**
- **Community Service il079g01**
- **Deviation Statement il079h01**

**PHA Plan
Table Library**

Optional Table for 5-Year Action Plan for Capital Fund (Component 7)

Complete one table for each development in which work is planned in the next 5 PHA fiscal years.

Complete a table for any PHA-wide physical or management improvements planned in the next 5 PHA fiscal year.

Copy this table as many times as necessary. Note: PHAs need not include information from Year One of the 5-Year cycle, because this information is included in the Capital Fund Program Annual Statement.

Optional 5-Year Action Plan Tables			
Development Number	Development Name (or indicate PHA wide)	Number Vacant Units	% Vacancies in Development
IL79-002	Beecher Hi-Rise	27	18%
Description of Needed Physical Improvements or Management Improvements		Estimated Cost	Planned Start Date (HA Fiscal Year)
Upgrade mechanical room's electrical system, make-up air system. Replace old exhaust system, replace service sink, faucets, section of leaking pipe and provide generator and transfer switch.		\$130,000.	02
Upgrade Beecher laundry room		13,000.	
Upgrade Bread of Love room		21,000.	
Add fire recall and heat detectors @ elevator		35,000.	
Replace entry doors on Dwelling Units		60,000.	03
Replace kitchen countertops		90,000.	
Install grease shields		12,000.	
Add range hoods		60,000.	
Waterproof building exterior		140,000.	05
Seal flat roof joints ***			

Total estimated cost over next 5 years	\$421,000.	

Optional Table for 5-Year Action Plan for Capital Fund (Component 7)

Optional 5-Year Action Plan Tables					
Development Number	Development Name (or indicate PHA wide)	Number Vacant Units	% Vacancies in Development		
IL79-002	Beecher Cottages	0	0%		
Description of Needed Physical Improvements or Management Improvements				Estimated Cost	Planned Start Date (HA Fiscal Year)
Replace kitchen countertops, add grease shields and refinish wall and base cabinets.				\$130,000.	03

Total estimated cost over next 5 years	\$130,000.	

Optional Table for 5-Year Action Plan for Capital Fund (Component 7)

Optional 5-Year Action Plan Tables				
Development Number	Development Name (or indicate PHA wide)	Number Vacant Units	% Vacancies in Development	
IL79-002	Vas Homes	0	0%	
Description of Needed Physical Improvements or Management Improvements			Estimated Cost	Planned Start Date (HA Fiscal Year)
Replace windows in Dwelling Units			\$180,000.	05
Total estimated cost over next 5 years			\$180,000.	

Optional Table for 5-Year Action Plan for Capital Fund (Component 7)

Optional 5-Year Action Plan Tables			
Development Number	Development Name (or indicate PHA wide)	Number Vacant Units	% Vacancies in Development
IL79-003	Turner Hi-Rise	5	5%
Description of Needed Physical Improvements or Management Improvements		Estimated Cost	Planned Start Date (HA Fiscal Year)
Dwelling Unit upgrades of kitchens and bathrooms		\$670,000.	04
Replace water heater in Dwelling Units		15,000.	
Replace Dwelling Unit windows with a/c sleeves		160,000.	05
Install air conditioners		60,000.	
Upgrade interior garbage area and mechanical systems;			02
Replace damaged concrete walk		6,000.	
Replace wall hydrants with anti-syphon type		1,000.	
Revise door swing		500.	
Replace make-up air system		6,000.	
Install panic devices and smoke detectors		15,000.	
Replace door and provide breaker at service sink		6,000.	
Upgrade laundry room		7,000.	
Install GFCI at sink, convert multizone system to VAV system; replace faucet in Community Room		10,000.	
Replace door and add sprinklers and make-up air unit in garbage room		9,000.	
Install back-up generator and transfer switch		65,000.	
Tuck-point exterior of building and seal flat roof joints		140,000.	05
Add freight elevator		300,000.	
Total estimated cost over next 5 years		\$1,470,500.	

Optional Table for 5-Year Action Plan for Capital Fund (Component 7)

Optional 5-Year Action Plan Tables				
Development Number	Development Name (or indicate PHA wide)	Number Vacant Units	% Vacancies in Development	
IL79-006	MI-DD Scattered Sites	0	0%	
Description of Needed Physical Improvements or Management Improvements			Estimated Cost	Planned Start Date (HA Fiscal Year)
Misc. Site Improvements			\$33,000.	03
Public entrance upgrades			300.	
Public restroom upgrades			1,100.	
Upgrade laundry rooms			1,600.	
Community Room upgrades			1000.	
Mechanical room upgrades			800.	
Mechanical system upgrades			3,100.	
Upgrade Dwelling Units (kitchens, bathrooms, bedrooms, closets, doors.)			140,000.	
Total estimated cost over next 5 years			\$180,900.	

Optional Table for 5-Year Action Plan for Capital Fund (Component 7)			
Development Number	Development Name (or indicate PHA wide)	Number Vacant Units	% Vacancies in Development
IL79-	PHA wide	55	12.41%

001,002,003,006			
Description of Needed Physical Improvements or Management Improvements		Estimated Cost	Planned Start Date (HA Fiscal Year)
Total estimated cost over next 5 years		\$1,114,500	
Basic Building Maintenance Program Resident Job Training		\$44,000.	2002
Security/Police Call-Back Services		30,000.	
A & E Costs – BLDD & KM2 Design		72,000.	
Operations – 10% of Physical Improvements subtotal		67,000.	
Basic Building Maintenance Program Resident Job Training		\$44,000.	2003
Security/Police Call-Back Services		30,000.	
A & E Costs – BLDD & KM2 Design		72,000.	
Operations – 10% of Physical Improvements subtotal		64,000.	
Basic Building Maintenance Program Resident Job Training		\$44,000.	2004
Security/Police Call-Back Services		30,000.	
Relocation Costs		16,000.	
A & E Costs – BLDD & KM2 Design		56,500.	
Operations – 10% of Physical Improvements subtotal		68,000.	
Basic Building Maintenance Program Resident Job Training		\$44,000.	2005
Security/Police Call-Back Services		30,000.	
A & E Costs – BLDD & KM2 Design		72,000.	
Operations – 10% of Physical Improvements subtotal		57,000.	
Upgrade Computers and software		35,000.	
New Office and Maintenance Building		239,000.	
Total estimated cost over next 5 years		\$1,114,500	

Table Library

CAPITAL FUND PROGRAM TABLES START HERE

Annual Statement/Performance and Evaluation Report					
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary					
PHA Name: Morgan County Housing Authority		Grant Type and Number Comprehensive Grant Program Capital Fund Program Grant No: IL06P07970799 Replacement Housing Factor Grant No:			Federal FY of Grant: FFY 1999
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:)					
X Performance and Evaluation Report for Period Ending: 12/31/00 <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations				
3	1408 Management Improvements Soft Costs	90,500	57,079.05	57,079.05	57,079.05
	Management Improvements Hard Costs				
4	1410 Administration				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	31,500	32,310	32,310	32,310
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	743,500	790,028.51	790,028.51	776,517.97
11	1465.1 Dwelling Equipment—Non-expendable				
12	1470 Non-dwelling Structures	15,500	1,559.87	1,559.87	1,559.87
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs	12,170	12,192.57	12,192.57	12,192.57
18	1499 Development Activities				
19	1502 Contingency				

Annual Statement/Performance and Evaluation Report**Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary**

PHA Name: Morgan County Housing Authority		Grant Type and Number Comprehensive Grant Program Capital Fund Program Grant No: IL06P07970799 Replacement Housing Factor Grant No:		Federal FY of Grant: FFY 1999	
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) X Performance and Evaluation Report for Period Ending: 12/31/00 <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
	Amount of Annual Grant: (sum of lines.....)	893,170	893,170	893,170	879,659.46
	Amount of line XX Related to LBP Activities				
	Amount of line XX Related to Section 504 compliance				
	Amount of line 3 Related to Security—Soft Costs	30,000	28,363.57	28,363.57	28,363.57
	Amount of Line XX related to Security—Hard Costs				
	Amount of line XX Related to Energy Conservation Measures				
	Collateralization Expenses or Debt Service				

Annual Statement/Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)
Part II: Supporting Pages

PHA Name: Morgan County Housing Authority		Grant Type and Number Comprehensive Grant Program Capital Fund Program Grant No: IL06P07970799 Replacement Housing Factor Grant No:					Federal FY of Grant: 1999		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories		Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
IL06P079002 Vas Homes	Complete upgrade of dwelling unit kitchens, bathrooms, floors, doors, electrical systems and plumbing fixtures		1460	20	600,000	652,863.01	652,863.01	652,863.01	Complete
IL06P079002 Beecher High Rise	Install GFCI outlets at kitchen sink		1460	100%	2,500	2,060.12	2,060.12	2,060.12	Complete
	Install panic devices at stairs		1470	22	13,500	1,559.87	1,559.87	1,559.87	Complete
	Add fire stop in electrical closets		1470	20	2,000	0	0	0	Rescheduled work in house
IL06P079001 Walnut Terrace	Renovation of obsolete units into classrooms for Early Years Program for School District #117		1460	4	141,000	121,594.84	121,594.84	121,594.84	Waiting on request for Final Payment
Management Improvements	Basic Building Maintenance Program Resident Job Training		1408	100%	60,500	28,715.48	28,715.48	28,715.48	Complete
Security	Police Call back Services		1408	100%	30,000	28,363.57	28,363.57	28,363.57	Complete
A&E Costs	Phase VII Contract with BLDD		1430	100%	31,500	32,310	32,310	32,310	Complete
Relocation Costs	Costs associated with renovations at the Vas Homes		1495.1	100%	12,170	12,192.57	12,192.57	12,192.57	Complete

Annual Statement/Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)
Part II: Supporting Pages

PHA Name: Morgan County Housing Authority		Grant Type and Number Comprehensive Grant Program Capital Fund Program Grant No: IL06P07970799 Replacement Housing Factor Grant No:					Federal FY of Grant: 1999		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories		Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work

Annual Statement/Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)
Part III: Implementation Schedule

[illegible]

CAPITAL FUND PROGRAM TABLES START HERE

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary					
PHA Name: Morgan County Housing Authority		Grant Type and Number Capital Fund Program Grant No: IL06P07950100 Replacement Housing Factor Grant No:			Federal FY of Grant: 2000
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) X Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations	60,000		3,933.10	3,933.10
3	1408 Management Improvements Soft Costs	65,000		11,065.25	11,065.25
	Management Improvements Hard Costs				
4	1410 Administration	5,000			
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	45,000		45,000	13,467
8	1440 Site Acquisition				
9	1450 Site Improvement	60,000			
10	1460 Dwelling Structures	581,188		4,130	4,130
11	1465.1 Dwelling Equipment—Non-expendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs	3,000			
18	1499 Development Activities				
19	1502 Contingency				

Annual Statement/Performance and Evaluation Report**Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary**

PHA Name: Morgan County Housing Authority		Grant Type and Number Capital Fund Program Grant No: IL06P07950100 Replacement Housing Factor Grant No:		Federal FY of Grant: 2000	
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) X Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
	Amount of Annual Grant: (sum of lines.....)	819,188		64,128.35	32,595.35
	Amount of line XX Related to LBP Activities				
	Amount of line XX Related to Section 504 compliance				
	Amount of line 3 Related to Security—Soft Costs	30,000		9,442.73	9,442.73
	Amount of Line XX related to Security—Hard Costs				
	Amount of line XX Related to Energy Conservation Measures				
	Collateralization Expenses or Debt Service				

Annual Statement/Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)
Part II: Supporting Pages

PHA Name: Morgan County Housing Authority		Grant Type and Number Capital Fund Program Grant No: IL06P07950100 Replacement Housing Factor Grant No:					Federal FY of Grant: 2000		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories		Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
IL06P079001 Walnut Terrace	Site Improvements add additional parking spaces		1450	100%	15,987				Incomplete
	Renovate obsolete dwelling units into classrooms for the Early Years Program		1460	10	581,188		4,130	4,130	Incomplete
IL06P079002 Vas Homes	Site Improvements seal coat and patch existing parking areas		1450	100%	3,375				Incomplete
IL06P079002 Beecher High Rise and Cottages	Site Improvements seal coat and patch existing parking areas		1450	100%	8,365				Incomplete
IL06P079003 Turner High Rise	Site Improvements add additional parking spaces		1450	100%	28,453				Incomplete
IL06P079006 MIDD Scattered Sites	Site Improvements seal coat and patch existing parking areas		1450	100%	3,820				Incomplete
Operations	MCHA Costs associated with Capital Fund		1406	100%	60,000		3,933.10	3,933.10	On going
Management Improvements	Basic Building Maintenance Program Resident Job Training		1408	100%	35,000		1,622.52	1,622.52	On going
Security	Police Call Back Services		1408	100%	30,000		9,442.73	9,442.73	On going
A&E Costs	Phase VIII Contract with BLDD		1430	100%	45,000		45,000		

Annual Statement/Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)
Part II: Supporting Pages

PHA Name: Morgan County Housing Authority		Grant Type and Number Capital Fund Program Grant No: IL06P07950100 Replacement Housing Factor Grant No:					Federal FY of Grant: 2000		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories		Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work

Annual Statement/Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)
Part III: Implementation Schedule

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Annual Statement/Performance and Evaluation Report

Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary

PHA Name: Morgan County Housing Authority		Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: IL06R07950100		Federal FY of Grant: 2000	
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:)					
X Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations				
3	1408 Management Improvements Soft Costs				
	Management Improvements Hard Costs				
4	1410 Administration				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	14,000		14,000	14,000
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	73,170		0	0
11	1465.1 Dwelling Equipment—Non-expendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1502 Contingency				
	Amount of Annual Grant: (sum of lines.....)	87,170		14,000	14,000
	Amount of line XX Related to LBP Activities				

Annual Statement/Performance and Evaluation Report**Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary**

PHA Name: Morgan County Housing Authority		Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: IL06R07950100		Federal FY of Grant: 2000	
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:)					
<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
	Amount of line XX Related to Section 504 compliance				
	Amount of line XX Related to Security—Soft Costs				
	Amount of Line XX related to Security—Hard Costs				
	Amount of line XX Related to Energy Conservation Measures				
	Collateralization Expenses or Debt Service				

Annual Statement/Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)
Part II: Supporting Pages

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Annual Statement/Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)
Part III: Implementation Schedule

[illegible]

Capital Fund Program Five-Year Action Plan Part I: Summary

PHA Name Morgan County Housing Authority				X Original 5-Year Plan <input type="checkbox"/> Revision No:	
Development Number/Name/HA- Wide	Year 1 2001	Work Statement for Year 2 FFY Grant: 2002 PHA FY: 2002	Work Statement for Year 3 FFY Grant: 2003 PHA FY:2003	Work Statement for Year 4 FFY Grant: 2004 PHA FY: 2004	Work Statement for Year 5 FFY Grant: 2005 PHA FY:2005
IL79-2 Beecher High Rise	Annual Statement	230,672	207,600		300,000
IL79-2 Beecher Cottages			128,900		
IL79-2 Vas Homes			172,740		
IL79-3 Turner High Rise		480,200		698,672	
IL79-6 Scattered Sites			160,672		
Management Improvements		85,000	85,500	85,500	120,000
A&E Costs		61,000	61,000	61,000	61,000
Operations		68,100	56,747	63,800	65,000
Relocation Costs				16,000	
HA Wide Non- dwelling Structure and equipment					378,972
Total CFP Funds (Est.)		924,972	924,972	924,972	924,972
Total Replacement Housing Factor Funds					

Capital Fund Program Five-Year Action Plan
Part II: Supporting Pages—Work Activities

Activities for Year 1	Activities for Year :02 FFY Grant:02 PHA FY:02			Activities for Year: 03 FFY Grant:03 PHA FY:03		
	IL79-2 Beecher High Rise Upgrade mechanical room electrical, exhaust, plumbing, and back-up generator	161,772		IL79-2 Beecher High Rise Replace entry doors, kitchen cabinets, Install grease shields and add range hoods	207,600	
	Upgrade laundryroom	13,000		IL79-2 Beecher Cottages Replace kitchen countertops, refinish wall and base cabinets add grease shields	160672	
	Upgrade Community Dining room	20,900		IL79-6 Scattered Sites Upgrade dwelling unit bathrooms, kitchens, laundryrooms, doors and mechanical systems	180,713	
	Upgrade fire recall @ elevators	35,000				
	II79-3 Turner High Rise Replace windows	160,000				
	New air conditioners	57,520				
	Upgrade garbage area, replace compactor, mechanical systems, electrical, exhaust, plumbing, back-up generator	343,000				
	Tuck point building	137,200				

	exterior					
	Resident Job Training	55,500		Resident Job Training	55,500	
	Security Police Call Back	30,000		Security Police Call Back	30,000	
	A&E Costs	61,000		A&E Costs	61,000	
	Operations	67,600		Operations	56,747	

Capital Fund Program Five-Year Action Plan

Part II: Supporting Pages—Work Activities

Activities for Year 1	Activities for Year :04 FFY Grant:04 PHA FY:04			Activities for Year: 05 FFY Grant:05 PHA FY:05		
	IL79-3 Turner High Rise Dwelling unit upgrade of kitchens, bathrooms, new door locks and H/W heaters	698,672		IL79-3 Turner High Rise Add freight elevator	300,000	
	Resident Job Training	55,500		Resident Job Training	55,500	
	Security Police Call Back	30,000		Security Police Call Back	30,000	
	A&E Costs	61,000		A&E Costs	61,000	
	Operations	63,800		Operations	65,000	
	Relocation Costs	16,000		Computer Upgrade and Training	35,000	
				New Office/Maintenance Building	378,972	

Component 3, (6) Deconcentration and Income Mixing

- a. X Yes ☐ No: Does the PHA have any general occupancy (family) public housing developments covered by the deconcentration rule? If no, this section is complete. If yes, continue to the next question.
- b. ☐ Yes X No: Do any of these covered developments have average incomes above or below 85% to 115% of the average incomes of all such developments? If no, this section is complete.

If yes, list these developments as follows:

Deconcentration Policy for Covered Developments			
Development Name:	Number of Units	Explanation (if any) [see step 4 at §903.2(c)(1)(iv)]	Deconcentration policy (if no explanation) [see step 5 at §903.2(c)(1)(v)]

Pet Policy

PET PERMIT APPLICATION

Tenant's Name_____

Address_____

Phone_____

Date of Request:_____

Type of Pet:_____

Name of Pet:_____

Male_____Female _____Age_____Weight_____

Breed of Pet (if applicable):_____

Color, Distinguishing Markings_____

Documentation Provided:

County and Date License Issued:_____

Proof of Neutering:_____

Date of Innoculations: Rabies_____Distemper_____

Boosters_____

Deposit Agreement Terms: 1 Month's Gross Rent \$_____

Balance \$_____ Monthly Payments \$_____

Monthly Payments Due_____ Consecutive Months_____

Signature of Tenant

Date

Staff Member Signature

Date

MORGAN COUNTY HOUSING AUTHORITY

PET POLICY

- A. **GENERAL STATEMENT.** This policy pertains to all Public Housing units. No family living in these units, as a condition of continued occupancy, be prohibited from keeping common household pets. In addition, no family can be denied admission to Public Housing because they own such pets including animals that assist persons with a disability.
- B. **COMMON HOUSEHOLD PETS** Include domesticated animals such as dogs, cats, birds or Fish, that are traditionally kept in the home for pleasure rather than for commercial purposes. Reptiles, birds, of prey and rodents are not to be considered common household pets.
- C. **PET RULES**
1. Dogs and cats shall be required to be inoculated for rabies, distemper and parvo virus.
 2. **SANITARY STANDARDS**
 - a. Each pet owner shall be responsible for the proper disposal of pet wastes in a safe and sanitary manner,
 - b. Pet waste shall be picked up and disposed of by placing in a plastic bag, sealing and depositing in a proper garbage receptacle;
 - c. Cat litter shall be changed at least weekly and shall be disposed of as above.
 2. **PET RESTRAINT**
 - a. All dogs and cats must be kept under control at any time they are outside the Dwelling Unit, either by leash or carried.
 - b. No pets are to be allowed at any time in any community areas where food is prepared or served.
 - c. Pets will only be allowed to be in the interior common areas for ingress or egress to and from the building.
 - d. Birds shall be confined to a cage. A bird may be removed from its cage while inside the Dwelling Unit for the purpose of handling, but shall be generally unrestrained.

4. REGISTRATION

All dogs and cats must be registered with the Authority before they are brought on to the premises. The registration shall include:

- a. A complete description of the pet, including breed, age, color, height and weight;
- b. A certification of a licensed veterinarian stating that the pet has received all inoculations, has been neutered or spayed if over the age of ten months and is free from communicable diseases and external parasites. i.e. fleas, ticks, etc.
- c. A written notification from a responsible person who will care for the pet if the pet owner is, for any reason, no longer able to care for the pet. The name, address and phone number of the person shall be included.
- d. A signed statement from the pet owner that he or she has read the Pet Policy and agrees to comply with the rules.

5. LIMITATIONS

- a. No more than one dog or cat shall be permitted in a household of any resident living in Public Housing.
- b. A dog's anticipated full grown height and weight shall not exceed 15 inches and 25 pounds respectively.

6. SECURITY DEPOSIT

- a. All owners of dogs or cats are required to pay a separate, refundable pet security deposit. The amount of the deposit shall be \$200.00 established by the Authority and shall not exceed the maximum amount allowable under the federal regulations.
- b. The pet security deposit shall be used to pay reasonable expenses directly attributed to the presence of the pet in the project building included, but not limited to, the cost of repairs to and fumigation of the Dwelling Unit.
- c. The Authority shall refund the unused portion of the pet security deposit as prescribed by State law when the tenant vacates, or within a reasonable time if the tenant no longer owns or keeps the pet in the unit.

7. All pets shall be currently licensed in accordance with Local laws and regulations.

8. STRAYS AND VISITORS

- a. The care or feeding of animals not registered with the Housing Authority shall be considered keeping a pet without permission, and a violation of this Policy.
- b. The keeping of pets on a temporary basis for others is not permitted. Pets belonging to visitors of tenants are not permitted in the buildings.

D. NUISANCE OR THREAT TO HEALTH OR SAFETY. Nothing in this policy shall prohibit the Authority from requiring the removal of any pet from a project if the pet's conduct or conditions is perceived to be a nuisance or threat to the health or safety of other residents or other persons in the community. Nuisance behavior shall include, but not be limited to, noise, unpleasant odors or other objectionable behavior.

E. DENIAL OF APPROVAL. The Authority reserves the right to refuse to register a pet if:

1. The pet is not a common household pet;
2. The keeping of the pet would violate any applicable house pet rule;
3. The pet owner fails to provide information as required under this policy; or
4. The Authority reasonably determines, based upon the pet owner's past habits and practices, that the pet owner will be unable to keep the pet in compliance with the pet rules and other lease obligations.

F. PET RULES VIOLATION PROCEDURES. Violation of these pet rules shall be considered violations of the Lease Agreement and shall be handled accordingly. This includes the tenant's right to a hearing under the Authority's Grievance Procedure.

Tenant Signature

Date

Housing Authority Representative

Date

Community Service and Self-Sufficiency

The Quality Housing and Work Responsibility Act of 1998 requires that housing authorities set forth in our Annual Plan a description of our Community Service and Self-Sufficiency Programs. This portion of the Plan is divided into three (3) sections:

- Our current resident programming;
- How we intend to comply with income changes for welfare recipients; and
- Compliance with the community service requirements.

First, let us describe our current resident programming. We are engaged in the following resident programs:

- Basic Building Maintenance Program
- School District #117 Parent House
- YMCA Out Reach Program
- Camp Hope

Second, we are in full compliance with the income changes for welfare recipients requirement of the Quality Housing and Work Responsibility Act of 1998. We took care of the issue by modifying the income definitions in both our Admissions and Continued Occupancy Policy and our Section 8 Administrative Plan. The relevant section reads as follows:

“2. If the amount of welfare is reduced due to an act of fraud by a family member or because of any family member’s failure to comply with requirements to participate in an economic self-sufficiency program or work activity, the amount of rent required to be paid by the family will not be decreased. In such cases, the amount of income attributable to the family will include what the family would have received had they complied with the welfare requirements and/or had not committed an act of fraud.

3. If the amount of welfare assistance is reduced as a result of a lifetime time limit, the reduced amount is the amount that shall be counted as income.”

Finally, we are in full compliance with the Community Service requirement. We took care of this issue by modifying both our Admissions and Continued Occupancy Policy and our Section 8 Administrative Plan. The relevant sections read as follows:

14.0 CONTINUED OCCUPANCY AND COMMUNITY SERVICE

14.1 GENERAL

In order to be eligible for continued occupancy, each adult family member must either (1) contribute eight hours per month of community service (not including political activities)

within the community in which the public housing development is located, or (2) participate in an economic self-sufficiency program unless they are exempt from this requirement

14.2 EXEMPTIONS

The following adult family members of tenant families are exempt from this requirement.

- A. Family members who are 62 or older
- B. Family members who are blind or disabled
- C. Family members who are the primary care giver for someone who is blind or disabled
- D. Family members engaged in work activity
- E. Family members who are exempt from work activity under part A title IV of the Social Security Act or under any other State welfare program, including the welfare-to-work program
- F. Family members receiving assistance under a State program funded under part A title IV of the Social Security Act or under any other State welfare program, including welfare-to-work and who are in compliance with that program

14.3 NOTIFICATION OF THE REQUIREMENT

The MORGAN COUNTY HOUSING AUTHORITY shall identify all adult family members who are apparently not exempt from the community service requirement.

The MORGAN COUNTY HOUSING AUTHORITY shall notify all such family members of the community service requirement and of the categories of individuals who are exempt from the requirement. The notification will provide the opportunity for family members to claim and explain an exempt status. The MORGAN COUNTY HOUSING AUTHORITY shall verify such claims.

The notification will advise families that their community service obligation will begin upon the effective date of their first annual reexamination on or after 10/1/99. For family's paying a flat rent, the obligation begins on the date their annual reexamination would have been effective had an annual reexamination taken place. It will also advise them that failure to comply with the community service requirement will result in ineligibility for continued occupancy at the time of any subsequent annual reexamination.

14.4 VOLUNTEER OPPORTUNITIES

Community service includes performing work or duties in the public benefit that serve to improve the quality of life and/or enhance resident self-sufficiency, and/or increase the self-responsibility of the resident within the community.

An economic self sufficiency program is one that is designed to encourage, assist, train or facilitate the economic independence of participants and their families or to provide work for participants. These programs may include programs for job training, work placement, basic skills training, education, English proficiency, work fare, financial or household management, apprenticeship, and any program necessary to ready a participant to work (such as substance abuse or mental health treatment).

The MORGAN COUNTY HOUSING AUTHORITY will coordinate with social service agencies, local schools, and the Human Resources Office in identifying a list of volunteer community service positions.

Together with the resident councils, the MORGAN COUNTY HOUSING AUTHORITY may create volunteer positions such as hall monitoring, litter patrols, and supervising and record keeping for volunteers.

14.5 THE PROCESS

At the first annual reexamination on or after October 1, 1999, and each annual reexamination thereafter, the MORGAN COUNTY HOUSING AUTHORITY will do the following:

- A. Provide a list of volunteer opportunities to the family members.
- B. Provide information about obtaining suitable volunteer positions.
- C. Provide a volunteer time sheet to the family member. Instructions for the time sheet require the individual to complete the form and have a supervisor date and sign for each period of work.
- D. Keep track of the family member's progress monthly and verify that the adult family member is in compliance with the community service requirement.

14.6 NOTIFICATION OF NON-COMPLIANCE WITH COMMUNITY SERVICE REQUIREMENT

The MORGAN COUNTY HOUSING AUTHORITY will notify any family found to be in noncompliance of the following:

- A. The family member(s) has been determined to be in noncompliance;
- B. That the determination is subject to the grievance procedure; and
- C. That, unless the family member(s) enter into an agreement to comply, the lease will not be renewed or will be terminated;

14.7 OPPORTUNITY FOR CURE

The MORGAN COUNTY HOUSING AUTHORITY will offer the family member(s) the opportunity to enter into an agreement prior to the anniversary of the lease. The

agreement shall state that the family member(s) agrees to enter into an economic self-sufficiency program or agrees to contribute to community service for as many hours as needed to comply with the requirement over the past 12-month period. The cure shall occur over the 12-month period beginning with the date of the agreement and the resident shall at the same time stay current with that year's community service requirement. The first hours a resident earns goes toward the current commitment until the current year's commitment is made.

If any applicable family member does not accept the terms of the agreement, does not fulfill their obligation to participate in an economic self-sufficiency program, or falls behind in their obligation under the agreement to perform community service by more than three (3) hours after three (3) months, the MORGAN COUNTY HOUSING AUTHORITY shall take action to terminate the lease.

MORGAN COUNTY HOUSING AUTHORITY

SUBSTANTIAL DEVIATION STATEMENT

Substantial deviations or significant amendments or modifications are defined as discretionary changes in the plans or policies of the housing authority that fundamentally change the mission goals, objectives or plans of the agency and which require formal approval of the Board of Commissioners.